## RF21 AAVITABLE CODA

								۸	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR													
Effective October 1, 2001								₽	PABI /ZZKS				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			42					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		B	BASIC FEE 370.00		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			ري minus 20=		• 23		L	X\$ 9=	207	OR	X\$18=		
INDEPENDENT CLAIMS			> minus 3 =					X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				ſ	+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL	577-	OR	TOTAL		
(Column 1) (Column 2) (Column 3)							;	SMALL	ENTITY	OR	OTHER SMALL'I		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	45	Minus	*	13	- 2	ı	XX &=	50	OR	X\$18=	7	
	Independent	.13	Minus	444		<u>- 0</u>		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		QR	+280=		
								TOTAL	202	OR	YOTAL ADDIT, FEE	1	
		(Column 1)		(Colu	mn 2)_	(Column 3)	. ~	) )		•	A0011.1 GE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY I FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		9		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	###	T CL AIM	<u> -                                    </u>		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM	لـــايــا		+140=		OR	+280=		
							L.	TOTAL		OR	TOTAL		
		(Column 1)		(Cobi	mn 2)	(Column 3)	AL	ODIT. FEE			ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUN PREVI	(EST (BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	***		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		-		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								446			.000		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	+140=		OR	+280≃ TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
EOD!	FORM PTO-675 (Rev. 8/01) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE												